

**ARKANSAS BOARD OF REGISTRATION FOR
PROFESSIONAL ENGINEERS AND LAND SURVEYORS**

**P. O. Box 3750
Little Rock Arkansas 72203
501/682-2824
Fax 501/682-2827**

www.arkansas.gov/pels

PROFESSIONAL SURVEYOR APPLICATION

Important -Do not complete this form until you read the instructions and the guidelines and you understand what is required. All information must be **typed** and all questions must be answered.

1. Name in full: _____ 2. Date: _____

3. If you have ever used another name, list here _____

4. S. S. No. _____

5. Phone #(O) _____ Ext. _____

(H) _____ Fax _____

6. Date of Birth: _____

7. E-mail address: _____

8. Mailing address: _____

Is mailing address company address? Yes ___ No ___

9. Employer: _____

10. Position: _____

11. Are you applying for written exam in Arkansas? Yes ___ No ___

12. Are you a resident of Arkansas? Yes ___ No ___

13. Are you applying for written exam in Arkansas? Yes ___ No ___

14. Are you applying for registration by reciprocity? Yes ___ No ___

15. Are you applying for reinstatement? Yes ___ No ___ AR PS # _____

16. Indicate below examination data: _____ month/year: _____ Date issued: _____

Fundamentals of Surveying exam: State _____ Exam date: _____ SI # _____

Principles & Practice of Surveying exam: State _____ Exam date: _____ PS# _____

17. State and Date of first registration as a Professional Surveyor State _____ Date _____

18. Other States in which you are registered as a Professional Surveyor: _____

19. Have you previously filed an application with this Board for any purpose (includes Surveyor Intern)?

Yes ___ No ___

20. Have you been denied registration in any State or Territory? Yes ___ No ___

If yes, list State _____ Date _____

Date Application Received:

Check: _____

___ Approve for Exam ___ Interview

___ Approve for Recip. ___ Discuss

___ Approve for Reins. ___ Reject

Attach recent photo with face not less than
3/4 inch wide. Please tape sides down.

Photo taken _____, 20_____

21. Have you ever been convicted of a crime (felony or misdemeanor, except traffic violation)? Yes ____ No ____
22. Have you ever been charged with a crime (felony or misdemeanor, except traffic violation), the disposition of which was other than by acquittal or dismissal? Yes ____ No ____
23. Have you ever surrendered your license or been found guilty of professional misconduct, unprofessional conduct, incompetence or negligence in any state or country? Yes ____ No ____
24. Are charges pending against you for professional misconduct, unprofessional conduct, incompetence or negligence in any state or country? Yes ____ No ____

(Affirmative answers to questions 19 thru 24 should be explained in Item 25).

25. Explanations of affirmative answers for questions 19 thru 24 on pages one and two _____

COLLEGE EDUCATION

*26. Institution Attended		Period of Attendance				Date	Degree
Name	Location	From	To	Years	Major	Graduated	Received

27. REFERENCES

Names and addresses of five (5) references (5 separate people) of which three (3) must be Professional Surveyors, who have personal knowledge of your character, professional reputation, and accomplishments.

At least one (1) of the PS references must be from a current or previous supervisor.

Name	Address	Phone #	State of PS Registration
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

*Please complete 26 and 27 even if you have requested that your NCEES record be forwarded to this Board.

28. Provide Experience Sheets

(Reinstatements: ACCOUNT FOR PERIOD(S) SINCE DATE OF ORIGINAL ARKANSAS REGISTRATION)

AFFIDAVIT CERTIFICATION, AUTHORIZATION AND RELEASE

State of _____ County of _____

Name of Applicant _____, being first duly sworn, deposes and says

I, the applicant named in this application, have read the contents hereof, and to the best of my knowledge and belief the statements contained in this application are true in substance and effect and are made in good faith and I hereby subscribe to and agree to conform with the Rules of Professional Conduct set forth in the Rules of the Board.

I also hereby authorize any individual, company or institution with whom I have been associated to furnish the Arkansas State Board of Registration for Professional Engineers and Land Surveyors with any information concerning my qualifications for professional registration in Arkansas which they have on record or otherwise, and do hereby release the individual company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred by me as a result of their furnishing such information.

Subscribed and sworn to before me this:

_____ day of _____, 20_____

(Signature of Applicant)

(SEAL)

My Commission expires _____ day of _____, 20_____

(Signature of Notary Public)

NOTE TO APPLICANTS: It is your responsibility to see that the reference and verification forms are returned **directly** to the Board office. This application cannot be considered until all transcripts; verification forms and reference forms are returned.